



# MEMPHIS AMBASSADORS PROGRAM

## WAIVER AND RELEASE AGREEMENT

As a participant with the Memphis Ambassadors Program (MAP), I hereby acknowledge and agree that I am not an employee of the City of Memphis and that I expressly and voluntarily assume all risks of injury, illness, death and property damage or loss that may result from my participation in the program. I further acknowledge and agree that I have no priority claim to become a City employee and that I am not eligible for City benefits such as vacation, sick leave, bonus days, pension, on-the- job injury, insurance or any other benefits or protection granted to City employees.

I hereby waive, release, discharge, and agree to hold harmless the City of Memphis, its officers, agents and employees from any and all liability, claims, demands, rights or causes of action, present or future, whether known or unknown, anticipated or not anticipated, which may occur as the result of my participation in the Memphis Ambassadors Program, even under circumstances in which such personal injury, illness, death, property damage or loss is caused in whole or in part by the action, inaction, or negligence of the City of Memphis, to the fullest extent permitted by law.

**I ACKNOWLEDGE THAT I HAVE READ THIS AGREEMENT AND THAT I FULLY UNDERSTAND THE RISKS OF PARTICIPATING IN THE MEMPHIS AMBASSADORS PROGRAM, AND I AM FULLY AWARE THAT THIS AGREEMENT WILL HAVE THE EFFECT OF RELEASING THE CITY OF MEMPHIS, ITS OFFICERS, AGENTS, AND EMPLOYEES FROM ANY AND ALL LIABILITY OR CLAIMS OF ANY NATURE OR KIND WHICH MAY OCCUR AS A RESULT OF MY PARTICIPATION IN THE PROGRAM.**

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Signature of Participant

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Date

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Signature of Parent, Guardian, or Legal Custodian  
Required if participant is under age 18

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Date